PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) **FOR** (Column 2) NUMBER FILED NUMBER EXTRA BASIC FEE TOTAL CLAIMS minus 20= INDEPENDENT CLAIMS minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zn 2

	TYPE	ENTITY	OR	OTHE SMALL	R THAN ENTITY
	RATE	FEE]	RATE	FEE
		345.00	OR		690.00
	X\$ 9=	63	OR	X\$18=	·
	X39=		OR	X78=	
L	+130=		OR	+260=	
	TOTAL	408	OŘ	TOTAL	

- Shoe in column 1	is less than zero, ent	er "0" in column
CI AIMS AC		

CLAIMS AS AMENDED - PART II

	_	(Column d)		, AUT III				
A		(Column 1) CLAIMS		(Column 2)	(Column 3)			
NDMENT		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
2	Total	*	Minus					
AME	Independent	*	Minus	**	=			
4	FIRST PRESE	NTATION OF MI	II TIDI 5 -	***	=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
	_	SWALL ENTITY

		CIAILLA	OR	SMALL ENTITY			
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
	X\$ 9=		OR	. X\$18=	FEE		
	X39≈		OR	X78=			
L	+130=		OR	+260=			
ΑI	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE			

MENDMENT B	Total	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		
Z	Total	*	Minus	**			
ME	Independent	*	Minus		=		
٧	FIRST PRESE	NTATION OF M	II TID:	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

		ADDI	7		
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
1	X\$ 9=		1	 	FEE
ı	ΛΨ 3=.		OR	X\$18=	
I	X39=				
ŀ			OR	X78=	1
ı	1120				
L	+130=		OR	+260=	
	TOTAL		_ [TOTAL	
A	DDIT. FEE		OR ,	TOTAL DDIT. FEE	

0		(Column 1) CLAIMS		(Column 2)	(Column 3)
AMENDMENT	ju j	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
2	Total	*	Minus		
뿔	Independent	*	Minus	**	=
<	FIRST PRESE	=			
1			THE DEP	ENDEN! CLAIM	

_				
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
X\$ 9=		OR	X\$18=	FEE
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR A	TOTAL DDIT EEC	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

		CLAIMS AS	FILED -	PART	l		s	MALL EN	ITITY		OTHER	THAN
(0			(Column	1)	(Column 2)			YPE [OR	SMALL	
TC	TAL CLAIMS	·					Γ	RATE	FEE	1	RATE	FEE
FO	R		NUMBER	FILED	NUMB	ER EXTRA	E	BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	27 min	us 20=	*			X\$ 9=		OR	X\$18=	,
INDEPENDENT CLAIMS 2 minus 3 =				*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT						Ī	+140=		OR	+280=		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II										OTHER	THAN
\mathcal{Q}	(Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	SMALL	
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	* 28	Minus		7	= }		X\$ 9=	7	OR	X\$18=	
AME	Independent	* 4 INTATION OF MI	Minus	L	CLAIM	= /		X42=	Ý1	OR	X84=	
	THO THESE	THE TOTAL OF THE	JETH CE DE	LNOCK	T OBAIN			+140=		OR	+280=	
							<u> </u>	TOTAL		OR	TOTAL	
C	V	(Column 1)		(Colu	mn 2)	(Column 3)	A	DDIT. FEE		•	addit. Fee	
		CLAIMS		HIGH	HEST		lг	···	ADDI-			ADDI-
AMENDMENT		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
NON	Total	* 28	Minus	**	28	-		X\$ 9=		OR	X\$18=	
AME	Independent	* 4 NTATION OF MI	Minus	***	Y T ČLAIM	= -		X42=		OR	X84=	
	THOTTREOL	INTANOI OF M	JEIII EE DEI	LINDLIN	ODAIN		•	+140=		OR	+280=	
				•				TOTAL		OR	TOTAL	
		(0.1,		(0.1	•	(0.1	ΑI	DDIT. FEE	, , ,		ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	-					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
AME	Independent	* INTATION OF MI	Minus	***	T CL AIM	=-		X42=		OR	X84=	
L	THOTFILDE	ATATION OF WI	JETH LE DEF	FIADEIA	CLAIN		\	+140=		OR	+280=	· · · · · · · · · · · · · · · · · · ·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									TOTAL	L—.		
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pa	aid For" IN TH	S SPACE	is less tha	n 3, enter "3."	~	DDIT. FEE L d in the app	ropriate box		ADDIT. FEE	<u> </u>
								- c F				